



STATE OF NEVADA
DEPARTMENT OF BUSINESS AND INDUSTRY
MANUFACTURED HOUSING DIVISION
1535 Old Hot Springs Rd Suite 60
Carson City, NV 89706
(775) 687-2060 • Fax (775) 687-5521

State of Nevada

County of _____)

AFFIDAVIT
SUCCESSOR TRUSTEE APPOINTMENT & POWERS
APPLICATION FOR CERTIFICATE OF OWNERSHIP

I/We, _____

Successor Trustee

_____ declare that I/we have been

Successor Trustee

appointed as successor trustee(s) of _____

Name of Trust

_____ and have the powers granted as successor trustee(s) to sign for the transfer of the described manufactured home.

Year: _____ Make: _____

Serial Number: _____

I/We the trustees, jointly and severally indemnify the Manufactured Housing Division, and hold the Manufactured Housing Division and the State of Nevada harmless from any liability on the account of the issuance of a Certificate of Ownership on said structure as aforesaid.

I/We hereby certify under penalty of perjury that the foregoing is true and correct.

Signature of Successor Trustee

Signature of Successor Trustee

ALL SUCCESSOR TRUSTEES MUST SIGN

State of _____ County of _____

Subscribed and sworn to before me, _____ the undersigned Notary Public,
this _____ day of _____, 20____, by _____.

Notary Public